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APPLICANTS

Patrick Taylor, Atlanta, GA;
 Scott Mewett, Holloways Beach, AUSTRALIA;
 Philip C. Brass, Roswell, GA;
 Theodore R. Doty, Roswell, GA;

**** CONTINUING DATA *******

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY GA	SHEETS DRAWING 3	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

King & Spalding
 191 Peachtree Street N E
 45th Floor
 Atlanta, GA30303

TITLE

VULNERABILITY ASSESSMENT AND AUTHENTICATION OF A COMPUTER BY A LOCAL SCANNER

FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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